

**APPLICATION FOR GRANT-IN-AID UNDER THE MATCHING SCHEME OF  
ASSISTANCE TO PUBLIC LIBRARIES TO ACQUIRE TV-CUM-VCP SETS  
FOR EDUCATIONAL PURPOSES**

From:

( To be routed through the State Government/Union Territory Administration)

To

The Director,  
Raja Rammohun Roy Library Foundation  
Block DD-34, Sector-1, Salt Lake,  
Calcutta-700064

Sub: Assistance to acquire TV-cum-VCP set for educational purposes.

Sir,

I submit herewith an application for a grant under the scheme, “ Matching Scheme of Assistance to public libraries to acquire TV-cum-VCP sets for educational purposes”. I certify that I have read the rules and regulations of the scheme and I undertake to abide by them. On behalf of the management, I further agree to the following conditions:

- a) All the assets acquired wholly or substantially out of the Foundation’s grant shall not be encumbered or disposed of or utilized for purposes other that for which grant is given. Should the library cease to exist at any time, such properties shall revert to the RRRLF, Calcutta.
- b) The TV-cum-VCP set will be used for educational purpose.
- c) The present application form duly filled-in is enclosed together with the required documents.

Yours faithfully,

Signature of the applicant  
With his designation and  
Office seal

**Annexure-1**  
(To be completed by all applicants)

1. Name of the library with full address : \_\_\_\_\_  
Including PIN Code : \_\_\_\_\_  
: \_\_\_\_\_
  
2. Whether the library is located in its own : \_\_\_\_\_  
building/rented house/other institution
  
3. Nature of the library : Govt./Aided/Private  
(Tick the appropriate)
  - a) If Govt., mention the Head of Deptt. : \_\_\_\_\_
  - b) If aided, whether it is a registered body : Yes/No  
(If so, please quote the Society Registration  
No: and date and attach Xerox copy of  
Society Registration Certificate)
  
4. Managing Committee-Names and Address : \_\_\_\_\_  
of the members (Separate sheet be attached) : \_\_\_\_\_  
: \_\_\_\_\_
  
5. Particulars of staff with designation : \_\_\_\_\_
  
6. Source of income- Grant from Govts. : \_\_\_\_\_  
(Central and State), donation from public,  
subscription from members etc.
  
7. Average monthly expenditure : \_\_\_\_\_
  
8. Average no. of readers and borrowers : \_\_\_\_\_  
per month
  
9. Total No. of books and periodicals : \_\_\_\_\_
  - a) Books : \_\_\_\_\_
  - b) Periodicals : \_\_\_\_\_
  
10. a) Whether the library has reading room : Yes / No  
facility

- b) Whether the library has facility of Electricity : Yes / No
11. Space available for the audio-visual unit : Yes / No
12. Whether the library is willing to maintain TV-cum-VCP from its sources : Yes / No
13. Total no. of educational video cassettes in stock : \_\_\_\_\_
14. Whether any grant is received from any other source for the same purpose : Yes /No
- If so, give particulars : \_\_\_\_\_

**15. Declaration:**

On behalf of the institution/organization I solemnly declare that the particulars furnished above are true. I certify that I have read the rules and regulations of the scheme and I undertake to abide by them.

**List of Enclosures in case of Aided Libraries :**

- i) Copy of Society Registration Certificate
- ii) Name and Addresses of the members of the Managing Committee

Place: \_\_\_\_\_ Signature of the applicant  
 Date: \_\_\_\_\_ With his designation and  
 Office seal

**16. Recommendation:**

This is to certify that the application has been scrutinized and the library is a public library of our State/U.T. and deserve assistance under this scheme. The Library is recommended for assistance from the matching fund. The proposal has been approved in the State Library Committee Meeting held on.....

Place: \_\_\_\_\_ Signature.....  
 Name and designation of the

Date:

Convener, SLC  
Office seal.